



00862.022225

2/6/5
JFW

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
YOICHI YAMAGICHI) : Examiner: G. Selby
Application No.: 09/858,454) : Art Unit: 2615
Filed: May 17, 2001) :
For: NOTIFICATION OF OPERATING)
STATUS IN IMAGE SENSING :
SYSTEM) : March 1, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

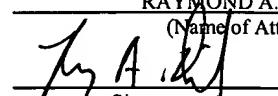
In response to the Office Action dated December 1, 2004, please amend the above-identified application as follows. The claim changes are reflected in the listing that begins at page 2, and the Remarks begin at page 19:

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on

March 1, 2005

(Date of Deposit)

RAYMOND A. DIPERNA (Reg. No. 44,063)
(Name of Attorney for Applicant)



Signature

March 1, 2005
Date of Signature



In re Application of:

Docket No. 00862.022225.

YOICHI YAMAGICHI

Appln. No.: 09/858,454

Examiner: G. Selby

Filed: May 17, 2001

Art Unit: 2615

For: NOTIFICATION OF OPERATING STATUS IN
IMAGE SENSING SYSTEM

Date: March 1, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 46	MINUS	** 151	= 0	x \$25 \$50	\$0.00
INDEP. CLAIMS	* 8	MINUS	*** 25	= 0	x \$100 \$200	\$0.00
Fee for Multiple Dependent claims \$180°/\$360						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

°Verified Statement claiming small entity status is enclosed, if not filed previously.

A check in the amount of \$____ is enclosed.

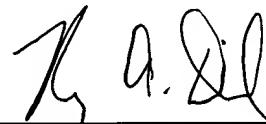
Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Patent and Trademark Office is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

A check in the amount of \$____ to cover the Extension fee for response with a ____-month extension is enclosed.

A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.

Applicant's undersigned attorney may be reached in our New York Office by telephone at (212) 218-2100 or by facsimile at (212) 218-2200. All correspondence should continue to be directed to our address given below.



Raymond A. DiPerna
Attorney for Applicant
Reg. No.: 44,063

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10132-3801